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PART B - ISSUE FEE TRANSMITTAL

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2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)

INVENTOR'S NAME

Street Address

City, State and ZIP Code

CO-INVENTOR'S NAME

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BOX

Check if additional changes are on reverse side

SERIES CODE/SERIAL NO.

FILING DATE

TOTAL CLAIMS

EXAMINER AND GROUP ART UNIT

DATE MAILED

07/825,476 01/29/94 018 (SHOUDANG, H) 2515 07/11/94

First Name:
Applicant

TITLE OF
INVENTION

EYEGGLASS CONNECTION DEVICE

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPN. TYPE	SMALL ENTITY	FEES DUE	DATE DUE
3 EAKLY-3059	351-121.000	C46	UTILITY	YES	4555.00	10/11/94

3. Correspondence address change (Complete only if there is a change)

4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.

1. Knobbe, Martens,
Olson & Bear

2

3

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100 MG 10/25/94 07825476 1 242 605.00 CK

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5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT FRONT PAGE. Insertion is subject to a \$25.00 filing fee.

(1) NAME OF ASSIGNEE

OAKLEY, INC.

(2) ADDRESS/CITY & STATE OR COUNTY/CITY & STATE

10 Holland, Louisville, KY 40241

(3) STATE OF INCORPORATION, IF ASSIGNEE IS A CORPORATION

California

All this application is NOT assigned.

Assignment is being previously submitted to the Patent and Trademark Office.

Assignment is being submitted under separate cover. Assignments should be directed to Box ASSIGNMENTS.

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(Signature of party in interest) _____ (Date) _____

Daniel E. Altman 34-115 10/11/94

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